

APR 26 2006

## PART B - FEE(S) TRANSMITTAL

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02/21/2006

**CORVIS CORPORATION**  
**INTELLECTUAL PROPERTY DEPARTMENT**  
**7015 ALBERT EINSTEIN DRIVE**  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Melinda Salin	(Depositor's name)
<i>Melinda Salin</i>	(Signature)
4/26/06	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/079,710	02/20/2002	Samuel Kerem	022002SK	7667

**TITLE OF INVENTION: EFFICIENT LOW POWER OPTICAL SOURCE DRIVER AND METHOD AND OPTICAL SYSTEMS AND DEVICES USING SAME**

04/26/2006 CNGUYEN1 00000041 500477 10079710

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	FC: 150 TOTAL FEE: 600.00	DA	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400		05/22/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
PHAN, HANH	2638	359-180000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	1. _____
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. _____
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## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Corvis Corporation

Columbia, MD

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):
<input checked="" type="checkbox"/> Issue Fee	<input type="checkbox"/> A check in the amount of the fee(s) is enclosed.
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<input type="checkbox"/> a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	<input type="checkbox"/> b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Michael C. Antone*

Date

4/26/06

Typed or printed name

Michael C. Antone

Registration No.

39,094

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COVER SHEET**

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[www.corvis.com](http://www.corvis.com)

To:	Commissioner for Patents	From:	Michael C. Antone
Organization:	U.S. Patent and Trademark Office	Date:	April 26, 2006
Fax:	571-273-2885	Fax	443-259-4278
Phone:		Phone:	443-259-4150
Pages:	4 (including cover page)		
Re:	U.S. Application Serial Number 10/079,710		

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**CERTIFICATE OF TRANSMISSION (37 CFR 1.8)**

Date of Transmission April 26, 2006

I hereby certify that the following papers and their attachments are being transmitted by facsimile to the United States Patent and Trademark Office at the fax number and on the date indicated above.

1. Transmittal Form; and
2. Fee Transmittal (x2).

Signature: Melinda Salin

Typed or printed name: Melinda Salin

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## TRANSMITTAL FORM

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Total Number of Pages in This Submission

3

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Application Number	10/079,710
Filing Date	February 20, 2002
First Named Inventor	Samuel Kerem
Art Unit	2638
Examiner Name	Hanh Phan
Attorney Docket Number	022002SK

## ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> (Issue) <input type="checkbox"/> Fee Transmittal Form (x2)  <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Remarks		
<input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

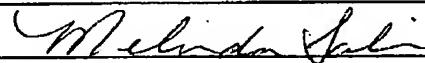
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature			
Printed name	Michael C. Antone		
Date	April 26, 2006	Reg. No.	39,094

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	
Typed or printed name	Melinda Salin
Date	April 26, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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